

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

TO: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

000-000-000-000-000

2. STATE:

Washington

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

10/01/00

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN

☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN

☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION

NOV 20 2000

7. FEDERAL BUDGET IMPACT:

a. FFY 01 \$4,840,765

b. FFY 02 \$5,055,195

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

(1) Attachment 22-A  
Page 9 B 1

(2) Supplemental Attachment 2.6 A page 7

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):

(1) Attachment 22-A  
Page 9 B 1

(2) Supplemental Attachment 2.6 A page 6

10. SUBJECT OF AMENDMENT:

MEDICARE COST SHARING INCOME EXCLUSION

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED:

EXEMPT

12. SIGNATURE OF STATE AGENCY OFFICIAL:

*Dennis Bradock*

13. TYPED NAME:

DENNIS BRADOCK

14. TITLE:

Secretary

15. DATE SUBMITTED:

11/16/00

16. RETURN TO:

Department Social & Health Services  
Medical Assistance Administration  
623 9th Ave. SE, MSS 45500  
Olympia, WA 98504-5500

17. DATE RECEIVED:

NOV 20 2000

18. DATE APPROVED:

JUN 7 2001

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

OCT 1 2000

20. SIGNATURE OF REGIONAL OFFICIAL:

151

21. TYPED NAME:

Teresa L. Trimble

22. TITLE: ASSOCIATE REGIONAL

DIVISION OF MEDICARE OF WASHINGTON

23. REMARKS:

TESTIMONY: 11/16/00

014

Ken & John authorized by state 5/25/01 to record page adjustment to HCFA 179 adding Supplemental Attachment 2.6 page 7 based on technical corrections previously recorded as page 6 & 7 pages were replaced w/ submitted revision

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

MORE LIBERAL METHODS OF TREATING INCOME UNDER  
SECTION 1902(r)(2) OF THE ACT

8. A more liberal method of treating income is established for the following Medicare Cost-sharing programs:

- (a) Qualified Medicare Beneficiary as described in 1902(a)(10)(E)(i) and 1905 (p)(1) of the Act; and
- (b) Specified Low-Income Medicare Beneficiary as described in 1902(a)(10)(E)(iii) and 1905 (p)(3) (A)(ii) of the Act.

When determining the available income of an individual for the above Medicare Cost-sharing programs, the department shall exclude from countable income an amount equal to that expended on medical expenses.

TN# 00-016  
Supersedes  
TN# ---

Approval Date: 6-7-01 Effective Date: 10/1/00

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

A. Mandatory Coverage – categorically Needy and  
Other Required Special Groups (continued)

27. Specified low-income Medicare Beneficiaries –

- a. Who are entitled to hospital insurance benefits under Medicare part A (but not pursuant to an enrollment under section 1818A of the Act);
- b. Whose income for calendar years 1993 and 1994 exceeds the income level in 25.b., but is less than 110 percent of the Federal Poverty Level, and whose income for calendar years beginning 1995 is less than 120 percent of the Federal Poverty Level; and
- c. Whose resources do not exceed twice the maximum standard under SSI.

(Medical assistance for this group is limited to Medicare Part B premiums under section 1839 of the Act).